Quick Reference Guide to the ADHD Pathway

ADHD referral criteria: quick checklist for health professionals referring children and young people to specialist services.

**Referral Criteria**
In order to accept referrals it is a requirement that all health professionals seek joint agreement for the referral from the child/young person’s GP in advance of referral. When referring, please ensure that you include the information requested in both section A and B below.

**Section A**
Please confirm:

1. **Source of referral (health professional)**
   - GP, Health Visitor, School Nursing Team, Other health professional

2. Name/s of lead health professional/s

3. Child/young persons’ GP agreement (if referrer not a GP)

4. Consent obtained from family and in some cases young person before the referral is made.

**Section B**
Information accompanying referral should include:

1. Concerns/symptoms of suspected ADHD clearly stated

2. Suspected diagnosis of ADHD clearly stated

3. Relevant medical history/direct observations of child/young person in multiple settings

4. Relevant ADHD rating scales e.g. Strengths and Difficulties Questionnaires (SDQs)

5. Relevant developmental assessment for pre-school child e.g. Schedule of Growing Skills (SOGS)

6. Relevant school/Educational Psychologist report/s

7. CAF report/s if available

8. Relevant psychosocial history/social services involvement

9. Interventions/support accessed within the community/school.

**Notes**
Children/Young people with identified emerging mental, emotional and attachment issues at time of referral should be referred to Specialist CAMHS

For children with moderate symptoms of suspected ADHD there should be a period of watchful waiting for at least 2 months with intervention.

For children with mild symptoms of suspected ADHD there should be a period of watchful waiting for at least up to 6 months.

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